

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:)	Customer No.: 29000
)	
Jeffrey YING)	Confirmation No. 8497
)	
Serial No. 10/646,459)	Group Art Unit: 2141
)	
Filed: August 22, 2003)	Examiner: Coulter, Kenneth R.
)	
For: CONTROL NETWORK WITH)	Office Action mailed:
MATRIX ARCHITECTURE)	
)	June 29, 2006
)	

TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith are: 1) Request for Continued Examination (RCE) Transmittal; 2) Amendment and Response to Office Action Pursuant to 37 C.F.R. § 1.114; 3) Information Disclosure Statement for the above-identified application.

- ☒ Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(4)] for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
1 month	<input type="checkbox"/> \$60.00	<input checked="" type="checkbox"/> \$120.00
2 months	<input type="checkbox"/> \$225.00	<input type="checkbox"/> \$450.00
3 months	<input type="checkbox"/> \$510.00	<input type="checkbox"/> \$1,020.00
4 months	<input type="checkbox"/> \$795.00	<input type="checkbox"/> \$1,590.00

CERTIFICATE OF TRANSMISSION

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being transmitted via electronic filing (EFS-Web) on the date shown below to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

June 5, 2007
Date of Transmission


Connie Kwon

- ☐ An extension for _____ months has already been secured and the fee paid therefor of _____ is deducted from the total fee due for the total months of extension now requested.
- ☒ Extension fee due with this Request **\$120.00**.
- ☐ **NO ADDITIONAL EXTENSION FEE IS REQUIRED.**

FEES FOR CLAIMS:

- ☐ Applicant claims small entity status under 37 CFR 1.27.

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

Total Claims	45	-	45	=	0	x	\$50.00	\$0.00
Independent Claims	5	-	5	=	0	x	\$200.00	\$0.00
Multiple Dependent Claims	\$360	(if applicable)					<input type="checkbox"/>	\$0.00
TOTAL OF ABOVE CALCULATIONS								\$0.00
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.								<input type="checkbox"/> \$0.00
Extension Fee (from above)								\$120.00
Request for Continued Examination Fee								\$790.00
TOTAL FEES SUBMITTED HERewith								\$910.00

- ☐ No additional fee is required.
- ☐ A check in the amount of _____ is enclosed to cover the above fee(s).
- ☒ Charge Deposit Account No. **09-0946** in the amount of **\$910.00**.
- ☒ The Commissioner is authorized to charge Counsel's Deposit Account No. **09-0946** for any fees required under 37 CFR §§ 1.16, 1.17 and 1.445 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account **09-0946**.

Respectfully submitted,

IRELL & MANDULA LLP

By: 

Christopher A. Vanderlaan
Reg. No. 37,747

Dated: June 5, 2007

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